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FORM 3 For An Authorized Committee Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. Bill Cassidy for US Senate PO Box 80505 ADDRESS (number and street) Check if different than previously Baton Rouge 70898-0505 reported. (ACC) FEC IDENTIFICATION NUMBER ▼ CITY STATE ZIP CODE STATE ▼ DISTRICT NEW **AMENDED** C00543983 3. IS THIS OR REPORT (N) (A) TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: General (12G) Runoff (12R) Primary (12P) April 15 Quarterly Report (Q1) Convention (12C) Special (12S) July 15 Quarterly Report (Q2) in the 2014 October 15 Quarterly Report (Q3) Election on State of January 31 Year-End Report (YE) 30-Day POST-Election Report for the: Special (30S) Runoff (30R) General (30G) Termination Report (TER) in the Election on State of 10 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Ralph Stephens 20 10 2014 Ralph Stepher Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information May subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office